

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

LEGPAC

ADDRESS (number and street)

38 Ivy St., SE

☐Check if different
than previously
reported. (ACC)

Washington

DC

20003

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00385534

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☒January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

07

01

2007

through

12

31

2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Harriet Rosen

Signature of Treasurer

Electronically Filed by Harriet Rosen

Date

01

29

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
LEGPAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
1	2	3	1	2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2007		10359.05
(b) Cash on Hand at Beginning of Reporting Period	4084.71	
(c) Total Receipts (from Line 19)	48461.31	96759.83
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	52546.02	107118.88
7. Total Disbursements (from Line 31)	5126.43	59699.29
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	47419.59	47419.59
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

LEGPAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
1	2	3	1	2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	0.00	5000.00
(i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized	0.00	5000.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	48000.00	89852.31
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5)	48000.00	94852.31
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	461.31	1907.52
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	48461.31	96759.83
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	48461.31	96759.83

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)	0.00	0.00
(i) Federal Share.....		
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	1526.43	49799.29
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	1526.43	49799.29
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3600.00	9600.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	300.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	5126.43	59699.29
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5126.43	59699.29

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	48000.00	94852.31
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	48000.00	94852.31
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	1526.43	49799.29
37. Offsets to Operating Expenditures (from Line 15, page 3)	461.31	1907.52
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1065.12	47891.77

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 15

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LEGPAC

A.

Full Name (Last, First, Middle Initial)

AIR LINE PILOTS ASSOCIATION PAC

Mailing Address 1625 Massachusetts Ave. NW
8th FloorCity State Zip Code
Washington DC 20036FEC ID number of contributing
federal political committee.**C** C00035451

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	1	/	2	0	0	7

Transaction ID: SA11C.4546

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

AMERICAN ASSOCIATION FOR JUSTICE POLITICAL ACTION COMMITTEE (AAJ PAC)

Mailing Address 1050 31st Street N.W.

City State Zip Code
Washington DC 20007FEC ID number of contributing
federal political committee.**C** C00024521

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	0	/	2	0	0	7

Transaction ID: SA11C.4542

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

AMERICAN ASSOCIATION OF CLINICAL UROLOGISTS POLITICAL ACTION COMMITTEE (UROPAC)

Mailing Address 1100 E. Woodfield Road Suite 520

City State Zip Code
SCHAUMBURG IL 60173FEC ID number of contributing
federal political committee.**C** C00273003

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	0	/	2	0	0	7

Transaction ID: SA11C.4551

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

11000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 / 15

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
 LEGPAC

A. Full Name (Last, First, Middle Initial) AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFIED Date of Receipt

Mailing Address 1625 L STREET NW

M M / D D / Y Y Y Y Y
 1 2 / 3 1 / 2 0 0 7

City State Zip Code
 WASHINGTON DC 20036

Transaction ID: SA11C.4537

FEC ID number of contributing federal political committee.

C C00011114

Amount of Each Receipt this Period

2500.00

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

B. Full Name (Last, First, Middle Initial)

American Hospital Association PAC

Date of Receipt

Mailing Address 325 Seventh Street NW
 Suite 700

M M / D D / Y Y Y Y Y
 1 2 / 3 1 / 2 0 0 7

City State Zip Code
 Washington DC 20004

Transaction ID: SA11C.4541

FEC ID number of contributing federal political committee.

C C00106146

Amount of Each Receipt this Period

2000.00

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

C. Full Name (Last, First, Middle Initial) AMERICAN OPTOMETRIC ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1505 Prince Street
 Suite 300

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 2 2 / 2 0 0 7

City State Zip Code
 Alexandria VA 22314

Transaction ID: SA11C.4534

FEC ID number of contributing federal political committee.

C C00024968

Amount of Each Receipt this Period

2500.00

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

SUBTOTAL of Receipts This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 15

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LEGPAC

A.

Full Name (Last, First, Middle Initial)

AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE

Mailing Address 520 N. NORTHWEST HIGHWAY

City State Zip Code
 PARK RIDGE IL 60068

FEC ID number of contributing
federal political committee.

C C00255752

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 1 0 / 2 0 0 7

Transaction ID: SA11C.4544

Amount of Each Receipt this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

FMR LLC POLITICAL ACTION COMMITTEE - FEDERAL (FIDELITY PAC)

Mailing Address 82 Devonshire Street

City State Zip Code
 Boston MA 02109

FEC ID number of contributing
federal political committee.

C C00380550

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
 1 1 / 0 5 / 2 0 0 7

Transaction ID: SA11C.4548

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

IRONWORKERS POLITICAL ACTION LEAGUE

Mailing Address 1750 New York Ave. NW Ste. 400

City State Zip Code
 Washington DC 20006

FEC ID number of contributing
federal political committee.

C C00027359

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 2 2 / 2 0 0 7

Transaction ID: SA11C.4531

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

12500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 / 15

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LEGPAC

A.

Full Name (Last, First, Middle Initial)
Machinists Non-Partisan Political League

Mailing Address 9000 Machinists PL.

City State Zip Code
Upper Marlboro MD 20772

FEC ID number of contributing
federal political committee. **C** C00002469

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: SA11C.4540

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)
NATIONAL EMERGENCY MEDICINE POLITICAL ACTION COMMITTEE

Mailing Address 1125 Executive Circle

City State Zip Code
Irving TX 75038

FEC ID number of contributing
federal political committee. **C** C00140061

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: SA11C.4538

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)
NEW YORK LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 51 Madison Ave.
Room 1109

City State Zip Code
New York NY 10010

FEC ID number of contributing
federal political committee. **C** C00158881

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 2 / 2 0 0 7

Transaction ID: SA11C.4532

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

15000.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 15

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	---	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

LEGPAC

A.

Full Name (Last, First, Middle Initial)

Real Estate Investment Trusts Political Action Committee

Mailing Address 1875 I Street , NW
Suite #600

City	State	Zip Code
Washington	DC	20006

FEC ID number of contributing
federal political committee.**C** C00303339

Name of Employer

Occupation

Receipt For:

☐ Primary
 ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	2		2	0	0	7

Transaction ID: SA11C.4536

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

48000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 15

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LEGPAC

A.

Full Name (Last, First, Middle Initial)

Internal Revenue Service

Mailing Address

City

Ogden

State

UT

Zip Code

84201-0039

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

461.31

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 7

Transaction ID: SA15.4550

Amount of Each Receipt this Period

461.31

Refund

SUBTOTAL of Receipts This Page (optional)

461.31

TOTAL This Period (last page this line number only)

461.31

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 / 15

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
LEGPAC

A. Full Name (Last, First, Middle Initial) Erickson & Co.	Transaction ID: SB21B.4567 Date of Disbursement																				
Mailing Address 38 Ivy St., SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	1		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		3	1		2	0	0	7												
City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period																				
Purpose of Disbursement Reimbursement - Mail, Fax, Phone Candidate Name	<table border="1"> <tr> <td colspan="10">61.38</td> </tr> </table>	61.38																			
61.38																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Evans & Katz LLC	Transaction ID: SB21B.4560 Date of Disbursement																				
Mailing Address 1831 Bay Street, SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		3	0		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		3	0		2	0	0	7												
City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period																				
Purpose of Disbursement Accounting Services Candidate Name	<table border="1"> <tr> <td colspan="10">85.00</td> </tr> </table>	85.00																			
85.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Evans & Katz LLC	Transaction ID: SB21B.4562 Date of Disbursement																				
Mailing Address 1831 Bay Street, SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	4		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		2	4		2	0	0	7												
City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period																				
Purpose of Disbursement Accounting Services Candidate Name	<table border="1"> <tr> <td colspan="10">234.18</td> </tr> </table>	234.18																			
234.18																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

380.56

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
LEGPAC

A. Full Name (Last, First, Middle Initial) Evans & Katz LLC	Transaction ID: SB21B.4564 Date of Disbursement																				
Mailing Address 1831 Bay Street, SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	3		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	3		2	0	0	7												
City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period																				
Purpose of Disbursement Accounting Services Candidate Name	<table border="1"> <tr> <td>463.32</td> </tr> </table>	463.32																			
463.32																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Evans & Katz LLC	Transaction ID: SB21B.4565 Date of Disbursement																				
Mailing Address 1831 Bay Street, SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	5		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	5		2	0	0	7												
City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period																				
Purpose of Disbursement Accounting Services Candidate Name	<table border="1"> <tr> <td>85.00</td> </tr> </table>	85.00																			
85.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Evans & Katz LLC	Transaction ID: SB21B.4566 Date of Disbursement																				
Mailing Address 1831 Bay Street, SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	0		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	0		2	0	0	7												
City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period																				
Purpose of Disbursement Accounting Services Candidate Name	<table border="1"> <tr> <td>108.97</td> </tr> </table>	108.97																			
108.97																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

657.29

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
LEGPAC

A.

Full Name (Last, First, Middle Initial)
Internal Revenue Service

Mailing Address

City Ogden State UT Zip Code 84201-0039

Purpose of Disbursement
Taxes

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.4563

Date of Disbursement

/ /

Amount of Each Disbursement this Period

485.58

SUBTOTAL of Disbursements This Page (optional)

485.58

TOTAL This Period (last page this line number only)

1523.43

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 / 15

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
LEGPAC**A.** Full Name (Last, First, Middle Initial)
FRIENDS OF MARY LANDRIEU INCMailing Address 607 14TH STREET NW SUITE 800
SUITE 1434

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
ContributionCandidate Name
MARY L LANDRIEUCategory/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: LA District:

Transaction ID: SB23.4555

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	7		2	0	0	7

Amount of Each Disbursement this Period

2300.00

B. Full Name (Last, First, Middle Initial)
TIM JOHNSON FOR SOUTH DAKOTA INC

Mailing Address PO BOX 1859

City SIOUX FALLS State SD Zip Code 57101

Purpose of Disbursement
ContributionCandidate Name
TIM JOHNSONCategory/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: SD District:

Transaction ID: SB23.4553

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	7		2	0	0	7

Amount of Each Disbursement this Period

1300.00

SUBTOTAL of Disbursements This Page (optional) ►

3600.00

TOTAL This Period (last page this line number only) ►

3600.00